

Electronic Filing System (EFS) Data
Electronic Patent Application Submission
USPTO Use Only

EFS ID: 11925
Application ID: 09682095
Title of Invention: Reliable Transport Layer Protocol
in Low Performance 8-bit
Microcontrollers
First Named Inventor: Oscar Mora
Domestic/Foreign Application: Domestic Application
Filing Date: null
Effective Receipt Date: 2001-07-19
Submission Type: Utility Patent Filing
Filing Type: new-utility
Confirmation Number: 0
Attorney Docket Number: 38146
Digital Certificate Holder: cn=Jeffrey Monroe Furr, ou=Registered Attorneys, ou=Patent and
Trademark Office, ou=Department of Commerce, o=U.S.
Government, c=US
Certificate Message Digest: V38pqLePHAbh5EQZXQey2Q==
Total Fees Authorized: \$355.0
Payment Category: CC - Credit Card
Credit Card Number: *****9699
Expiration Date: 09162002
Card Holder Name: Antonio Mugica
RAM User ID: EFSPROD
RAM Accounting Date: null
RAM Sequence Number: 0
RAM Payment Status: RAM Fail: reason code: 1 return code:-80
Postal Code: 33487



TRANSMITTAL FORM

Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number:

38146



Reliable Transport Layer Protocol in Low Performance 8-bit Microcontrollers

First Named Inventor: Mr. Oscar Mora

SUBMITTED BY

Name:

Mr. Jeff Furr Esq.

Electronic Signature Mark: Jeff Furr

Date Signed: 20010719

I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.

I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

bibd-transmittal

RelTransapds.xml

fee-transmittal

RelTransfee.xml

declaration

Dis1.tif

declaration

Dis2.tif

specification

Relspec.xml

Attached Image File(s):

Dis1.tif

Comments:

0962045-071091
T06T20" W6022950

Please type a plus sign (+) inside this box → ☒

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	38,146
	First Named Inventor	Mora, Oscar
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Reliable Transfer Layer Process for
Per-Surface 8-bit Micro-processors
(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type or stamp your name in this box. ☐

Approved for use on forms 12/14/2001 OMB 3526-0046

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Project of 12-99, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Directed correspondence to:

☐ Customer Number
or Bar Code Label



29569

or ☐

Correspondence address being:

PATENT & TRADEMARK OFFICE

Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made of information and facts believed to be true, and further that these statements were made with the knowledge that would be statements and the same are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned invention.

Given Name

OSCAR

Family Name

MORA

(first and middle (if any))

or Surname

Inventor's
Signature

[Signature]

Date

7/11/2001

Residence: City

CARACAS

MIRANDA

State

VENEZUELA

Country

VENEZUELAN

Citizenship

Mailing Address

EL PARAISO, AVE. LA MONTANA, RES. ADAN Y EVA #101

Mailing Address

CARACAS

City

MIRANDA

State

ZIP

ZIP

VENEZUELA

Country

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned invention.

Given Name

(first and middle (if any))

Family Name

or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

City

State

ZIP

Country

ED 6170-560299D

FEE TRANSMITTAL

Electronic Version 1.0.4

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Small Entity

Small Business Concern

TOTAL FEES AUTHORIZED: \$ 355

BANK (CREDIT) CARD INFORMATION:

Credit Card Number: 9699
Expiration Date: 20020916
Authorized Name: Antonio Mugica
Billing Address: 33487

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	201	\$ 355

Subtotal For Basic Filing Fee: \$ 355

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 17	203	\$ 9	0	\$ 0
Independent Claims: 2	202	\$ 40	0	\$ 0

Subtotal For Extra Claims Fees: \$ 0